								Application or Docket Number					
PATENT APPLICATION FEE DETERMINATION RECO Effective October 1, 2003								-63-06-11.					
CLAIN'S AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TC	TAL CLAIMS		25				R/A	TE	FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		BASI	BASIC FEE 385.00		OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			85 minus 20∞		• 5		XS	XS 9+		OR	X\$18-		
INDEPENDENT CLAIMS			3 minus 3 =		. 0		X4	X43=		OR	X86=		
MU	LTIPLE DEPEN	DENT CLAIM P	RESENT				+145=			OR	+290×		
• If the difference in column 1 is less than zero, enter "0" in column 2						olumn 2	TO	TAL		ОR	TOTAL		
CLAIMS AS AMENDED - PART II 7-26-95 (Column 1) (Column 2) (Column 3)							SM	SMALL ENTITY		OR	OTHER SMALL I		
AMENDMENT A	/-/h-01	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	SER DUSLY	PRESENT EXTRA	RA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total		Minus	* 2	5	- /	XS	9=		OR	X\$18=	(
	Independent	• 3	Minus	ر		- /	X4	3=	/	OR	X86=		
2	FIRST PRESE	NTATION OF MI	PENDENT	NDENT CLAIM 7		+14	 5=	1	ОЯ	•290=			
•								OTAL		OR	TOTAL		
(Column 2) (Column 2) (Column 3)								FEE	····		NDOTT. FEE!		
_		(Column 1)		HIGH		Communication	-		ADDI-) ' I		ADDI-	
AMENDMENT B	12/16/05	REMAINING AFTER AMENDMENT		NUM PREVK PAID	OUSLY	PRESENT EXTRA	· RA	TE	TIONAL FEE		RATE	TIONAL FEE	
	Total	.2.	Minus	-2	5	- /	XS	9-		OR	X\$18=		
	Independent	.3	Minus	***	3		X4	3=		OR	X68=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						+14	i5=		OR	+290=		
2/1/1.							ADDIT	OTAL		OR	TOTAL		
0	416/06	(Column 1)		(Cotur	nn 2)	(Column 3)							
		CLAIMS		HIGH					ADDI-			ADDI-	
AMENDMENT C		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	OUSLY	PRESENT EXTRA	RA	TE	TIONAL FEE		RATE	TIONAL FEE	
	Total	- 21	Minus	•• 6	25	• /	XS	9-		OR	X\$18-		
	Independent	• 3	Minus	***	3	2./	X4	3=	7	OR	XB6a		
۲	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM										+290=	/-	
The second secon												- /	
of the entry in column 1 a less than the entry in column 1. What is the state of the Mighest Humber Previously Paid For IN THIS SPACE is less than 20, enter 20. ADDIT, FEE OPEN IN THIS SPACE is less than 3, enter 3.*												/	
	o use "regness for The "Highest Nurs	der Previously Pai	d For (Total or	Independ	eni) is the	highest numbe	r found in	he ap	propriate ba	in cal	umn 1.	i	